FILED EFFECTIVE



Signature:_

CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

2017 MAY - 1 AM IL: 17

SECRETARY OF STATE

1. The assumed business r	name which the undersig	STATE OF IDAHO gned use(s) in the transaction of business is:
Barefoot Painting		
 The individual and/or ent the assumed business n 		address(es) of those doing business under me you listed in #1):
Tara Lash-Turner	50 W. Mineral Stre	eet, St. Maries, ID 83861
(Name)	(Address)	
(Name)	(Address)	
(Name)	(Āddress)	
(Name)	(Address)	
The general type of husin	ness transacted under th	ne assumed business name is:
☐ Retail Trade ☐ Wholesale Trade ☒ Services	☐ Construction☐ Agriculture☐ Manufacturing	Transportation and Public UtilitiesMining
I. Mailing address for future	e correspondence:	5. Name and address for this acknowledgment copy is (if other than # 4):
Tara Lash-Turner dba Barefoot Painting		Laura Brakebill, Bookkeeper
(Name) 50 W. Mineral Street		(Name) PO Box 224
(Address)		(Address)
St. Maries, ID 83861		Santa, ID 83866-0224
(City)	(State) (Zipcode)	(City) (State) (Zipcode)
rinted Name: Tara Lash-Turner		Secretary of State use only
Signature:	2	
Printed Name: Laura Brakebill		IDAMO SECRETARY OF STATE 05/01/2017 05:00
Signature: Laura Brakebill		CK:1442 CT:338826 BH:1581652 16 25.00 = 25.00 ASSUM NAME #2
Printed Name:		N . 2 . ==
Signaturo:		D 194085

Rev. 08/2015